APPLICATION DATA SHEET

Application Information	
Application Number:	10/563,791
Filing Date::	01/06/2006
International Filing Date::	07/07/2004
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	No
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	No
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	•
Title::	Reusable Fluid Dispenser
Attorney Docket Number::	BFETH-1036832
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	24
Total Drawing Sheets::	15
Small Entity?::	Yes
Latin Name::	

Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Anton
Middle Name::	
Family Name::	Orlitzky
Name Suffix::	
City of Residence::	Delta
State or Province of Residence::	British Columbia
Country of Residence::	Canada
Street of Mailing Address::	7388 Wilson Avenue
City of Mailing Address::	Delta
State or Province of Mailing Address::	British Columbia
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	V4G 1H3

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Diana
Middle Name::	
Family Name::	Lencar
Name Suffix::	
City of Residence::	Calgary
State or Province of Residence::	Alberta
Country of Residence::	Canada
Street of Mailing Address::	102-4516 Valiant Drive NW
City of Mailing Address::	Calgary
State or Province of Mailing Address::	Alberta
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	T3A OY1
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Danny
Middle Name::	
Family Name::	Sheremeta
Name Suffix::	
City of Residence::	Delta

State or Province of Residence:: British Columbia

Country of Residence:: Canada

Street of Mailing Address:: 7388 Wilson Avenues

City of Mailing Address:: Delta

State or Province of Mailing Address:: British Columbia

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: V4G 1H3

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Klaus

Middle Name::

Family Name:: Oehr

Name Suffix::

City of Residence:: Delta

State or Province of Residence:: British Columbia

Country of Residence:: Canada

Street of Mailing Address:: 7388 Wilson Avenue

City of Mailing Address:: Delta

State or Province of Mailing Address:: British Columbia

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: V4G 1H3

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Colin
Middle Name::	•
Family Name::	Oloman
Name Suffix::	
City of Residence::	Delta
State or Province of Residence::	British Columbia
Country of Residence::	Canada
Street of Mailing Address::	7388 Wilson Avenue
City of Mailing Address::	Delta
State or Province of Mailing Address::	British Columbia
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	V4G 1H3
Correspondence Information	
Correspondence Customer Number::	27111
Phone Number::	(415) 875-3266
Fax Number::	(415) 986-8054
Representative Information	

Representative Customer Number::	27111

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent filing Date::
This Application	claims priority to	60/484,657	07/07/2003

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

A.T.S. Electro-Lube Holdings Ltd.

Street of Mailing Address::

7388 Wilson Avenue

City of Mailing Address::

Delta

State or Province of Mailing Address::

British Columbia

Country of Mailing Address::

Canada

Postal or Zip Code of Mailing

V4G 1H3

Address::